## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 1 of 126

Participant must provide all of the information below in English:

<ol> <li>Participant's c</li> </ol>	contact information, including email addr	ess, and that of its counsel,
if any:	1 1/	1
Participant's Name:	Teresita Martinez	Garcia
Participant's Address:	f. O. Box 893, Dora	
Participant's Email Address:	teresitamartinez 1218	a gmail. com
Name of Counsel:		
Address of Counsel:		
Email Address of Counsel:	- & 5	
2. Participant's C	Claim number and the nature of Participa	nt's Claim:
Claim Number:	101300	
Nature of Claim:	Public employee	and pension retired
By: Levesita to	the saula	
Signature	Hinez García	
Print Name	Hyper Carcia	S.D. CLE
8 4		RECEIVED  NO. AUG 20  CLENK'S S.DISTRIC SAN JUA
Title (if Participant is	not an individual)	AN COP
August 16,	2021	
Dute		<b>©</b>

P.O. Box 893 Dorado P.R.

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United States District Court, Lerk's Office, 150 Ave. Parlos Chardon Ste. 150, SanJuan P. R.

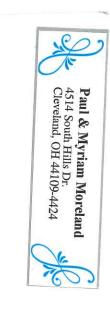
SAN JUAN PR 009
18 AUG 2021 PM 2 L



Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:
Participant's Name: Myriam Torres - Moreland
Participant's Address: 4514 South Hills Drive Cleveland, Ohio 4
Participant's Email Address: Moreland 234@msn.com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 171047
Nature of Claim: Rublic Employee and Pension Retiree
By: Myman down Mordand Signature  Claure
Myriam Torres - Moreland Print Name
Classroom Teacher Title (if Participant is not an individual)
8-13-21
Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice
of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in <i>In re Commonwealth of Puerto Rico</i> , Case No. 17 BK 3283-LTS, through the Court's case filing
system on or before the applicable deadline. If you are <u>not</u> represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's

Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.



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CLOVELYND OF

Ave. Carlos Chardon Ste. 156

San Juan, P. K. 00918-1767

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

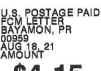
if any:	A 2		. 7	0 0				
Participant's Name:	Norma	I.	MAtos	Gala	nza		_	
Participant's Address:	C/12 H-67	U.b.El	Cortijo Ba	yamor	Pik	0.00	2950	P
Participant's Name: Participant's Address: Participant's Email Address:	linnette 021	19 D yo	shoo- Com,	lynne	He 21	750)	Ta hoo-	Co
Name of Counsel:							-	
Address of Counsel:								
Email Address of Counsel:	-							
2. Participant's C Claim Number:  Nature of Claim:  By:   Signature	Case No. 1	381	4			7-bK	<u>-03</u> 2	83
Title (if Participant is  18- Agos to  Date	Policia Estates not an individual) - 2021	)	(4) - K - G		STIER SOFFICE	4: 100	RECEIVED & FILED	
Instructions for Filing Noti	ce of Particinatio	n: If you	are represente	d by cou	insel, th	is Not	ice	

San Juan,

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Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:			
Participant's Name:	C/12 H-67 Usb. El Coldi	, Helendez	
Participant's Address:	C/12 H-67 Usb. El Cortis	Bayamon P.R. 00;	95
Participant's Email Address: _	lynnette 2195 2 yanos com	* *	
Name of Counsel:	*		
Address of Counsel:			÷
Email Address of Counsel:	ž		
2. Participant's Cl	aim number and the nature of Participant'	s Claim:	
Claim Number:	54840		
Nature of Claim:	eno No. 17 - 6K - 03566 / Caro No.	17-6K-03283	
By: Ally W		e e e	
Signature		PECETA VIEW STAN	
Lynne He Maldona Print Name	do Melender		
Agente Chol	( Ditatal)	INCOTO SOLUTION OF THE PROPERTY OF THE PROPERT	
Title (if Participant is r	not an individual)		
18- Agos;	to-2021	<u>a</u> :	
Date			

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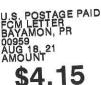
United States District Court, Clark's Clark's Office 150 Ave. Conlos Chandon Ste. 150 San Juan, P.R. 00918-1767





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## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Pro se Notices of Participation Page 9 of 126

Participant must provide all of the information below in English:

1. Participant's co	ontact information, including em	ail address, and that of its counsel,	
Participant's Name:	María A. Torres	Rodríguez Díaz, P.R. 00795	
Participant's Address:			
Participant's Email Address:	mariaatoresrodrige	uez@gmail.com	
Name of Counsel:		15	
Address of Counsel:			
Email Address of Counsel:			
2. Participant's C	Claim number and the nature of P	articipant's Claim:	
Claim Number: Nature of Claim:	Wages owed from we labor laws of the d	age increases due to lifferent years. Law#89 Law#90	7
By: Signature	EL	Law #96 Law #16	4
María A. Torre	s Rodriguez	-44.	
Print Name  Title (if Participant is  August 1  Date	not an individual)	RECEIVED & FILL  2021 AUG 20 PM 4  S. CHRK'S OFFICE SAN JUAN PR	
Instructions for Filing Notice	ce of Particination: If you are re	epresented by counsel, this Notice	. 3

must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in In re Commonwealth of Puerto Rico, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.



# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Pro se Notices of Participation Page 11 of 126

Participant must provide all of the information below in English:

1. Participant's contact information, including émail address, and that of its counsel, if any:
Participant's Name: Nereida Rivera Torres
Participant's Address: HC-05 Box 13893 Juana Díaz, P.R. 0079
Participant's Email Address: nereidas riveras torres@ hotmail.com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 54556
Nature of Claim: Wages owed from wager fine reases due to labor laws of the years.
By: Signature Law #89
Neverda Rivera Torres  Law # 96  Law # 164
Print Name
Sign B
Title (if Participant is not an individual)  August 18, 2001
August 18, 2001  Date
Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice
must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in <i>In re</i>

Commonwealth of Puerto Rico, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's

Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.



# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 13 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:	
Participant's Name:	Mabel H. Barros Lopez
Participant's Address:	PO Box 33 1344 Ponce P.R. 00733
Participant's Email Address:	
Name of Counsel:	EDNCATION DEPART 1965-2006 1965-200
Address of Counsel:	San Juan P.R.
Email Address of Counsel:	
2. Participant's	Claim number and the nature of Participant's Claim:
Claim Number:	584-09-3202 (seg. social)
Nature of Claim:	
By: Mahy H. Bans	CARLicense - 510972
Signature	RADS LOPEZ PASS port
MABEL H. BA Print Name	522803187
Title (if Participant is	s not an individual)
TEACHER Secondary Date Teacher adult	2021
1965-200	

Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are <u>not</u> represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

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Ponce, P. R. 01733 Pb Box 331344

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CourT 150 Ave Carlos Chardon Ste, 150 clerk's Office at COUNT, clerk's office

San Juan P.R. 00 918-1767

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Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 15 of 126

Participant must provide all of the information below in English:

if anv	contact information, including email address	
Participant's Name:	RAMON O. GONZALE	2 SANTANA
Participant's Address:	RAMON O. GONZALE  HCYG BOX 5436  DORADO P.R. DOE	
Participant's Email Address	DORADO P.R. OOE	46-9612
Name of Counsel:		
Address of Counsel:	rame 2/12 (a) 9 Mi	41 - 20-4
Email Address of Counsel:		ŝ
2. Participant's	Claim number and the nature of Participant	t's Claim:
Claim Number:		
Nature of Claim:		
Ву: _	2	
Signature RAYON 01	GONZÁLEZ SANTA	THE SE SE SE
Print Name		RECEIVED  2021 AUG 20  2021 AUG 20  SAN JUA  SAN JUA
Title (if Participant is	s not an individual)	Z-1-7 (2)
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Date		

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RAMON O GONZALEZ

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# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 17 of 126

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel,
if any: Participant's Name:  Joe Mendez Mendez
Participant's Address: 53 & Muior le New Ca Nay 1200627
Participant's Email Address: 1cd Sose Wenger Venger @gmail.com
Name of Counsel: myself
Address of Counsel: Will
Email Address of Counsel: Were
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 17 Bk 3283 L75
Nature of Claim: PROMES A TITLE 11
By: Signature
Print Name  Print Name
Print Name  Individual  Title (if Participant is not an individual)
Aug 17 2021 Date

Mr. Jose Mendez Mendez
53 Estate Ste 3 Munoz Rivera Camuy, PR 00627 -armen Iris Luna Gouzallez

**另位其如果,对你** 

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# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Pro se Notices of Participation Page 19 of 126

Participant must provide all of the information below in English:

if any:	et information, including email address, and that of its counsel,
Participant's Name:	urmen Iris Luna Gouzaloz
Participant's Address: 5	3 Ellunoz Rivera Camuy PRODEZ,
Participant's Email Address:	uneniris luna gouzalez@ yalos.com
Name of Counsel:	ryself
Address of Counsel:	nine
Email Address of Counsel:	nine
2. Participant's Claim	number and the nature of Participant's Claim:
Claim Number:	1BK 3283 L7S
Nature of Claim:	PROMESA Title III
By: Signature	Dir Leur yf
Carmen Iris	Luna Gouzález
Print Name	Page 2
nor a district of factor of	n individual)
Title (if Participant is not a	n individual)
Aug 17 202 Date	

Carmen Iris Luna Gonzallez

Mr. Jose Mendez Mendez
53 Estate Ste 3 Munoz Rivera
Camuy, PR 00627

18 AUG 2021 PM 2 L

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# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc: Pro se Notices of Participation Page 21 of 126

Participant must provide all of the information below in English:

-	contact information, including email address, and that of its counsel,
if any:	
Participant's Name:	Lylma Landrau Kivera
Participant's Address:	Ruta Ruja 1 #1 Box 35 Carolina P.R. 0098.
Participant's Email Address:	N/A
Name of Counsel:	Loda. Ivonne Gonzalez Morales
Address of Counsel:	Edificio Gallardo, San Juan P.R. 00921
Email Address of Counsel:	
2. Participant's	Claim number and the nature of Participant's Claim:
Claim Number:	17BK3283 - LTS
Nature of Claim:	Discovery for confirmation of Commonus
By: Bulma Senda	Plan of advaisment. I already includ
Signature Zulma Land	Plan of advaisment. I already include my salarie readjustment ay Rivera document before.
Print Name	not an individual)
Title (if Participant is	Exis N
agosto 16	de 2021
Date	
Instructions for Filing Noti	as of Participation: If you are represented by counsel this Notice

2021 AUG 20 PM 4: 19

Ruta Rural 1 BOX 35

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## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 23 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any: Slavia Maria Kivova & Participant's Name: Participant's Address: Participant's Email Address: Name of Counsel: Address of Counsel: dudan 5990 Womeil Email Address of Counsel: Participant's Claim number and the nature of Participant's Claim: 2. Claim Number: Nature of Claim

CC, 150 Me Carlos Chardon ste 150 San Juan, PR. Cog 18-1767 nited States District Court

18 AUG 2021 PM 2 SAN JUAN PR 009



Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

if any:
Participant's Name: Helen Burgos Rodriguez
Participant's Address: Urb-Los Angeles calle Areyto # 477 Yaua, Pk
Participant's Email Address: helenbra @ live . com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: No. 17 BK, 3283 - LTS
Nature of Claim: The Common Weg 1 th of Puerto Rico et al
By: Nelen Burgos Rodriguez Signature
Helen Burgas Rodriguez Print Name
Print Name  Promesa title [[1]  Title (if Participant is not an individual)
Title (if Participant is not an individual)
16 de agosto de 2021
Date  On the State of the State

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U.S. DISTRICT COURS
SAN JUAN, P.F.

United States District

SAN JUAN PR

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00918-170449

San Juan, P.A. 00918-1767

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:
Participant's Name: Helen Burgos Rodz.
Participant's Address: Urb Los Angeles Calle Areyto#477 lauco 11
Participant's Email Address: helenbra @ live.com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: No. 17 BK 3 283 - LTS
Nature of Claim: The Common Wealth of Puerto Rico
By: Helen Burgos Rodz. Signature
Helen Burgos Rodz. Print Name
Promesa Title III  Title (if Participant is not an individual)
16 de agosto de 2021

2021 AUG 20 LINK'S OFFICE DISTRICT COUR SAN JUAN, P.F. auco N. R. 00698 19 AUG 2021 PM 1 SAN JUAN PR

Carlos Chardon Ste. 150, San Juan, P.A. 00918-1767

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

ii any.					
Participant's Name:	Irma	Perez Bi	vevor		27 1
Participant's Address:	HCO7 B	Box 2365	Ponce	P.ROO	731
Participant's Email Address:	irmajani	el Damail	, com	1.7.6	
Name of Counsel:	None				
Address of Counsel:		¥			
Email Address of Counsel:					
2. Participant's C	laim number and	the nature of Pa	articipant's Cla	aim:	
Claim Number:	22857		All Prise.		
Nature of Claim:	Teachers	retiremen	+ pensio	n	3 22
By: Signature	que c		e de la companya de l	SAN C	CEIVE
Irma Perez Print Name	Bivera			<b>2</b> 99	ED & FII
English tea Title (If Participant is r	cher not an individual)	1964/1964 1214. 			3
8/11/21 Date					



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uce, 150 Ave. Corbo Chandon Ste.

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## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Pro se Notices of Participation Page 31 of 126

Participant must provide all of the information below in English:

1. Participant's contact information, including email a if any:	address, and that of its counsel,
Participant's Name: Beatre Kam	os Jours
Participant's Address: P.O. 1502- 70	6 Cherry f. K. out
Participant's Email Address: beatrices 19@ h	ofmail.com
Name of Counsel:	- 1
Address of Counsel:	20
Email Address of Counsel:	
2. Participant's Claim number and the nature of Partic	cipant's Claim:
Claim Number: PA 1845 SRT 55593	· ·
Nature of Claim:  By: De atriz Cames Jure	
Signature  Beatriz Ramos Torres  Print Name	BELGINES C SAN JUA
Title (if Participant is not an individual)  Date  Title (if Participant is not an individual)	O PN 4: 21

CLERK'S OFFICE U.S. DISTRICT COURS SAN JUAN, P.F. 70400 19 AUG 2021 PM 1 SAN JUAN PR

## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 33 of 126

Participant must provide all of the information below in English:

	ontact information, i	ncluding 'e	mail address,	and that of its	s counsel,
if any:	0.1	. /	//		
Participant's Name:	Kicardo	Mark	MUD NI	eves	- dlei
Participant's Address:	Ricardo He oz	BOX	6451,	Carrie Carrie	20060
Participant's Email Address:			/	Caly	may - Co
Name of Counsel:					
Address of Counsel:					
Email Address of Counsel:					
2. Participant's C	laim number and the	e nature of	Participant's	Claim:	
Claim Number:					
Nature of Claim:	Rotiranie	ut el	ació	i i	
By: Signature	1 1 1 1	otener lengt		500	RECE 2021
Kicardo Ma	is hold News	-		至高	EIVED Aug 20
Print Name	1			<b>2</b> 500	80
Title (if Participant is r	not an individual)			250	2 7
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## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 35 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

if any:
Participant's Name: Melvin Delgado Turado
Participant's Address: 30 Celinas de San Agustin, Las Fredras, P.C.0077
Participant's Email Address: K-mel 27a yuhoo com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: (6918) últimos 4 digitos del seguro Social
Nature of Claim: empleade active, gobrerne de PR.
By:
Signature  Molin Delando Tunado
Print Name
Title (if Participant is not an individual)
14 de aps to de 2021 Date



# 

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:
Participant's Name: TrmoR haves - Rody 19 ve
Participant's Address: Park Sandins 2214
Participant's Email Address: irchques rodriquez@smail (0)
Name of Counsel: Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 22170
Nature of Claim: Retirement Pension Retireme
By: Mes Volumes loves Signature
Irma R. Chaves Rodningez
Print Name Note I need that these
Title (if Participant is not an individual)  Proceedings
Title (if Participant is not an individual)
august 15,202/ retirement
Date Pension Pension
<u>Instructions for Filing Notice of Participation</u> : If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice
of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in In re
Commonwealth of Puerto Rico, Case No. 17 BK 3283-LTS, through the Court's case filing
system on or before the applicable deadline. If you are <u>not</u> represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's
Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.
\$25 P

SRF 55176

# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF PUERTO RICO

In re:

THE FINANCIAL OVERSIGHT AND MANAGEMENT BOARD FOR PUERTO RICO.

as representative of

THE COMMONWEALTH OF PUERTO RICO, THE EMPLOYEES RETIREMENT SYSTEM OF THE GOVERNMENT OF THE COMMONWEALTH OF PUERTO RICO, AND THE PUERTO RICO PUBLIC BUILDINGS AUTHORITY,

Debtors.1

PROMESA Title III

No. 17 BK 3283-LTS

(Jointly Administered)

Case:17-03283-LTS Doc#:17948-1 Filed:08/23/24 Entered:08/23/21 11:44:01 Page 1 of 2

Administración de los Sistemas de Retiros of Participation Page 39 of 126

Charles Redongues It mat

Administración de los Sistemas de los Empleados del Gobierno y

Estado Libro Asociado



- Portada
- Quienes Somos
- Leves
  - o Ley 447 y Ley 12
- Sonticios
  - o Pensionados y Beneficiarios
  - Participantes
- Oficinas
  - Organigrama
    - Área de Apoyo
    - Area de Servicio



## Acceso Rápido a:

- + Servicios en Linea
- + Manual de Beneficios y Servicios
- + Empleado Público Orientate Ley 7
  - Linea de Orientación Ley 7 (787) 999-7575

1.31 martes, 0 Son





Palance/Aporteción Balance Préstamos Estatus Sol. Prestamos

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seguiorsocial.

XX-1902 XXX-

Nombre:

IRMA R. CHAVES RODRIGUEZ

Sistema de Re tiro:

ELA - Programa de Cuenta de Ahorro para el Retiro (R 2000)

406 - DEPARTAMENTO DE LA FAMILIA

Agencia: Periodo del Estado de Cuenta (dia-

mes-año):

31-12-2008

Balance de Aportaciones:

\$22,140.38

Años de Servicio:

9 Años y 2 Meses

Administration action action action as the REPHS-A. File to 08/28/21 Deprend: 08/23/21 11/44:01 Desc:

Pro se Notices of Participation Page 40 of 126 may 22 170

Balance de Aportaciones

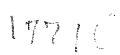
El Balance de las Aportaciones Individuales son basadas en el último Estado de Cuenta procesada Los balances aquí reflejados por concepto de aportaciones individuales y los años de servicio e revisión.

Esta información no es una certificación oficial de la Administración de los Sistemas de

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^SUBIR^

### GOBIERNO DE PUERTO RICO

Departamento de la Familia



### CERTIFICACIÓ N

Certifico que la Sra. Irma R. Chaves Rodriguez, Seguro Social xxx-xx-1902, presta servicios para la Administración de Desarrollo Socio Económico de la Familia (ADSEF), adscrita al Departamento de la Familia desde el 15 de enero de 2013 hasta el presente.

La señora Chaves Rodriguez, ocupa un puesto Regular de Carrera en el Servicio Público como Administradora de Sistema de Oficina III, devengando un salario mensual de \$2,468.00.

Certifico Correcto, hoy 1 de Mayo de 2017 en San Juan, Puerto Rico.

Jérime Sánchez Figuerda Administradora Auxiliar

Oficina de Recursos Humanos

jco

Nota: Esta certificación, no setá válida si presenta tachaduras, correcciones o alteraciones, si no presenta el logo o sello oficial de la agencia y firma del Administrador Auxiliar de Recursos Humanos o su representante autorizado.

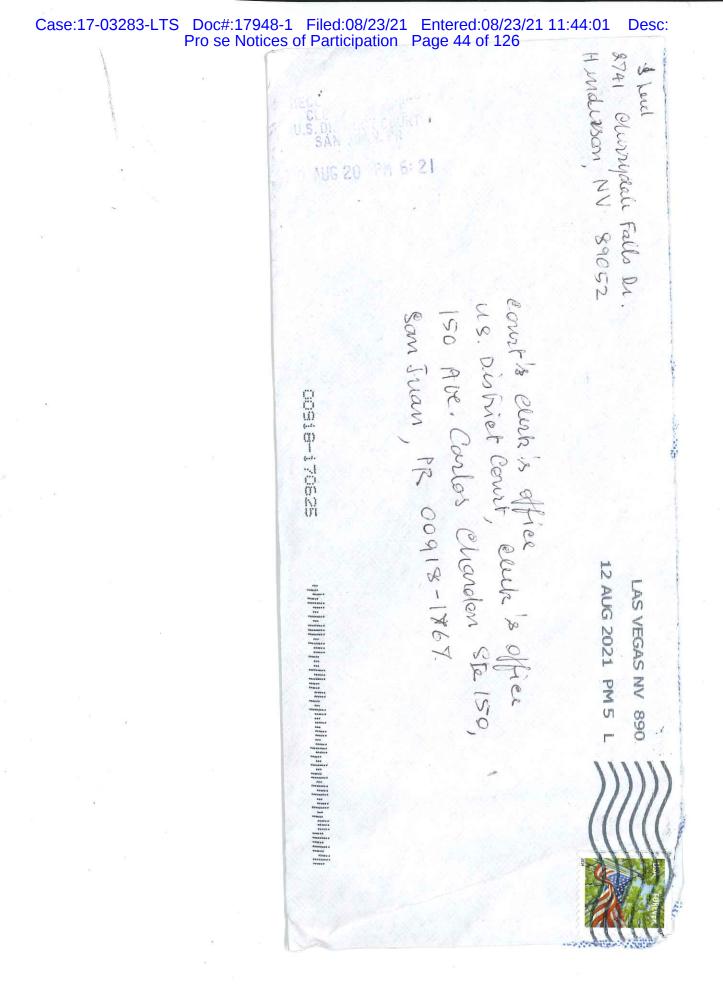
## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc: Pro se Notices of Participation Page 43 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:							
Participant's Name:	50	Μ.	LERD .	0			
Participant's Address:	2741	Chir	rydale	talls	Dr. Ha	enderson	NV 89052
Participant's Email Address:	30	mler	d 1 (	y yan	acc . e	OYN	
Name of Counsel:							
Address of Counsel:					-		
Email Address of Counsel:		2)			<u> </u>		
2. Participant's Claim Number:	Claim num	ber and	the nature  BK  NiDali	of Particip	ant's Claim - LTS	tox (D	3481
Nature of Claim:	19	Tr. Total	7	, , , , , , ,	Cev		
By: Signature	1220	1		*	9		U.S. DISS
Print Name						20 PH	
Title (if Participant is	not an ind	lividual)				5.2	25 E
Date							



Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 45 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

if any: Participant's Name: Participant's Address: Participant's Email Address: ( Name of Counsel: Address of Counsel: Email Address of Counsel: Participant's Claim number and the nature of Participant's Claim: K 37.83-US Claim Number: Nature of Claim: By: gosto-2021

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Clerk's office 150 Ave.

Carlos Chardon Ste. 150,

Carlos Chardon Ste. 150,

Carlos Chardon Ste. 150,

#### Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 47 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

Participant's Name:

Participant's Address:

Participant's Email Address:

Participant's Counsel:

Address of Counsel:

Participant's Claim number and the nature of Participant's Claim:

Claim Number:

168160

Nature of Claim:

Salarios Impagus

By:

Signature

Belyn be Sesi's Caper Uo

Print Name

Title (if Participant is not an individual)

8/18/2021

1.

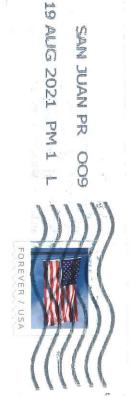
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United States District Court
clerk's Office
150 Aue. Carlos Chandon ste. 150
San Juan, 120 00918-1767



#### Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 49 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any: Participant's Name: Participant's Address: Participant's Email Address: evelyn. d. carrillo Q gmail. Com Name of Counsel: Address of Counsel: Email Address of Counsel: Participant's Claim number and the nature of Participant's Claim: Claim Number: Nature of Claim: By: Title (if Participant is not an individual)

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Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 51 of 126

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel,
if any:
Participant's Name: Gloria E Garcia Cruz
Participant's Address: Urb. Vista Alegre, 920 Calle Livio Villalba P. Co
Participant's Email Address: ingrid-rosado38@gmail.com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 80944 ET. A.L.
Nature of Claim: Un paid Wages by the government of P.R.  By: Gionature  Signature
Signature  Claria E Garcia Cruz
Print Name
Title (if Participant is not an individual)
Qugust, 13 _ TH; 2021

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#### Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 53 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

if any: Participant's Name: BOX 2008 Coamo PR 00769 Participant's Address: luzptomes 0308 @ smail .com Participant's Email Address: Name of Counsel: Address of Counsel: Email Address of Counsel: 2. Participant's Claim number and the nature of Participant's Claim: Romeraso y 3% de aumento de Ression Claim Number: Nature of Claim: Wilberts Colore Torres 15- agost - 2021 Date

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#### Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 55 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

if any:					
Participant's Name:	ERNOSTO	Colon	Rodni	quez	
Participant's Address:	HC 03	BOX 952	6, Vi-Um	Has PR	0074
Participant's Email Address:	Ms				
Name of Counsel:	Jesus		ROSANI		311
Address of Counsel:	P.D-Box	1544, I	Trans D	CAZ, P.R.	00745
Email Address of Counsel:	j mrosariof	elixely mail	··com		
2. Participant's C	laim number and th				
Claim Number:	No. 17 B	K 3783-	LTS		
Nature of Claim:	Pension	del M	unreipeo		
By: & Gant Coly	Rakes				
Signature	in series and time the	r nov on cross		ar in Elem	and the same
ERNOSTO COLOR	1 Odsogu	•			S CO
Print Name		20		6	
Nh				9	
Title (if Participant is	not an individual)			88	
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Date				10	

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Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc:

Pro se Notices of Participation Page 57 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any: Participant's Name: Guanica, PR 00653 Participant's Address: Participant's Email Address: manitza martinez bekn @ gmail. com Name of Counsel: Address of Counsel: Email Address of Counsel: Participant's Claim number and the nature of Participant's Claim: Claim Number: Nature of Claim: Print Name Title (if Participant is not an individual)

Mrs. Mantza Martinez Belin Guanica, PR 00653 MC 38 Box 8708

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San Juan, PR : 00918-1767



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Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:	A COLOR OF THE COL
Participant's Name:	Orlando Hernandez
Participant's Address:	n colle Mander Agradall 00002
Participant's Email Address:	o Handoja dz Kiko @ g mail.com
Name of Counsel:	
Address of Counsel:	
Email Address of Counsel:	
2. Participant's C	Claim number and the nature of Participant's Claim:
Claim Number:	17BK 3283-LTS
Nature of Claim:	lones a titlett
Ву:	
Signature	and the state of t
Daga de	Manual ex
Print Name	THE WANGE
	<u> </u>
Title (if Participant is	not an individual)
Nate   30,	21

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#### Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 61 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

if any:
Participant's Name: Ochado Hernandez
Participant's Address: 17 Calle Miradero, Aguada PRODEO
Participant's Email Address: Orlando hazkiko @ gmail com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 17 BK 3283-LTS
Nature of Claim: Aromesa Title III  By: Signature
Print Name
Print Name a ball of which the Dept. Sequipers requirements. It this Notice is file this Notice you are in the this Notice you are in the this Notice you are in the this Notice you are not to a the result.
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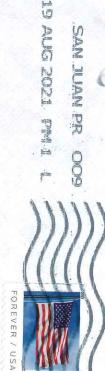
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#### Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc: Pro se Notices of Participation Page 63 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any: CANIOS J MICHANO GARUA

50 CAM. #5 UNIT#501 EdiF. 18 Industrial luchetti, Bayamon PR. 00901
-7403 Participant's Name: Participant's Address: Participant's Email Address: Name of Counsel: Address of Counsel: Email Address of Counsel: 2. Participant's Claim number and the nature of Participant's Claim: No: 17 BK 3283 - LTS Claim Number: Nature of Claim: By: Signature CANOS 3 MECRONO GARCIA Print Name Title (if Participant is not an individual)

Your honor:
I will apreciated if Next time you
can send me the notice in spanish, that will
help me to understand all the Future information
Thank you,
Carlos 3. Medrono

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Carlos 3 Medrano Garcia

Industrial Luchetti

Bayeman, P.R. 00961-7403

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United States District Court, 150 Aut. Carlos Chardon Ste. 150 Clerk's OFFice San Juan, P.R. 00918-1767

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1.

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

ii airy.
Participant's Name: Carmen G. Colón Maldonado
Participant's Address: 10 Flamingo Apartments Apt. 6203 Bayanon P.R. 002
Participant's Email Address: Camen gladys 79 @ Gmail. com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: No. 17 BK 3283 - LTS
Nature of Claim:  By: Janne of Colon Maldonado  Print Name  To intly Administered  Maldonado  Print Name
The Financial Oversight and Management Board Puerto Rico Title (if Participant is not an individual)
<u>August 18, 2021</u> Date

armen G. Colón Bayamón, P.K. 00959 Apt. 6203

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San Juan, P.R. 00918-1767

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Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 68 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

if any:	186 200			
Participant's Name:	Maria	E. Orti	12	
Participant's Address:	Calle 13	Num. 162	DBo Mame	yal Dorado
Participant's Name: Participant's Address: Participant's Email Address	Idonitha	ive Email	Solamente	por corre
Name of Counsel:				
Address of Counsel:				
Email Address of Counsel:				F 40
2. Participant's	Claim number ar	nd the nature of Pa	rticipant's Claim	:
Claim Number:	1728	61		
Nature of Claim:	Public	Employed	e Claim	つる量
By: Maria 8.0 Signature	ontig	. / /		SAN SAN
María E. Print Name	Ortiz			
August 18 Title (if Participant is	,2021	al)		<u>a</u>
Data	, not an marvidue	<i>)</i>		

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Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:	
Participant's Name:	Axel Benitez Algandro P.O. Box 478 Gurabo, P.R. GO778
Participant's Address:	P.O. Box 478 Gurabe, P.R. 60778
Participant's Email Address:	
Name of Counsel:	NIR
Address of Counsel:	N/A
Email Address of Counsel:	p/A
2. Participant's Cl	aim number and the nature of Participant's Claim:
Claim Number: clain	# 61109
Nature of Claim: St.  By: Axel Bently the Signature	eps graated by the government of Punto Rice espublic employee that were not granted insalary for several years:
Axel Benit Print Name	ez Aléjandro
NIA	28 37 31
Title (if Participant is r	not an individual)
18 agosto	2021

P.O. Box 478 Source bo, P.P. 00778

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Office, 150 Ave. Carles Chardon Ste. 150 San Juan, P.R. 00918-1767

Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 72 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

if any:			
Participant's Name:	Juan A. Soto S	anchez	7
Participant's Address:	j. S. to Senebez ?	Coamo, P.K. e	0769
Participant's Email Address:	j. soto Sanchez ?	2 & gmay 1. C	20m.
Name of Counsel:			
Address of Counsel:			
Email Address of Counsel:	2 1 2 1 01 11 0		
2. Participant's C	Claim number and the nature of Par	ticipant's Claim:	
Claim Number:	17-3283	· ·	
Nature of Claim:	. 100	1.5	-
By: Juan a.s.			
Juan A. So Print Name	to Sancher		Soc
Title (if Participant is	not an individual)	620	
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Juan A. Sato Sánchez P.O. BOX 1480 Coamo, P.R. 00769

United State District Course Clerks.
150 Auc. Carlos Chandon Ste. 150
San Juan, P.R. 00918-1767

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Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:	
Participant's Name:	Sosé A. CAbrera Sotomayou
Participant's Address:	P. D. Box 2161- Gomo, P.R. 00769
Participant's Email Address:	-NONE-
Name of Counsel:	-NONE-
Address of Counsel:	- NONE-
Email Address of Counsel:	-NONE
2. Participant's C	laim number and the nature of Participant's Claim:
Claim Number:	17 BK - 3283-LTS
Nature of Claim:	I claim that the gobernent paid
By: Qui A. L. Signature	e the Jebbits, he don't pay.
Jose A. Calv Print Name	rem Sotomayor
Dill this doe Title (if Participant is	not an individual)
18 August	12021
Date	

U.S. DISTRICT COURT
SAN JUAN, PR

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Sosé A. Cosicia Sate Mayor P. A. BOX 2161 ENAMO, P.R. 00769

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Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel.

1.

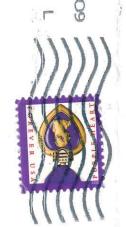
if any:
Participant's Name: Josefina Morales Torres
Participant's Address: Parcelas El Cotto, 15 Calle 10, Dorado Ro
Participant's Email Address: josefina o morales, torres 53 agmail. com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 155141 and 131635
Nature of Claim: Public Employer - Teacher's Retirement of PR.
By: Jarelen Monles Jones
Signature
Josefina Morales Torres
Print Name
Title (if Participant is not an individual)
August 19, 2021 Date

Parcelas El Cotto
15 Calle 10
Dorado, P.D. 60646

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United States District Court Clerk's Office 150 Ave. Carlos Chardon Ste 150 San Juan, P.R. 00918-1767



# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 78 of 126

Participant's contact information, including email address, and that of its counsel,

Participant must provide all of the information below in English:

1.

Date

if any:	
Participant's Name:	Pablo L. Moran Ortiz
Participant's Address:	P.O. Box 1245 Horniquens, P.R. 00668.
Participant's Email Address:	poblomoranid & gmail.com
Name of Counsel:	
Address of Counsel:	
Email Address of Counsel:	
2. Participant's C	Claim number and the nature of Participant's Claim:
Claim Number:	CHANGE A CHARLEST SERVICE THE STREET
Nature of Claim:	Special Education Rehabitation Services
By: Rablo Mores Signature	Ortion
Pahlo Morain	Oction
Print Name	are the remember of created to a course significant process of the cities of the course of
Title (if Participant is	not an individual)

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# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 80 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:
Participant's Name: Margarita Moreles Figueroa.  Bo-Naranjo P.O. Boy 1138 Gmerio, P.A. 2078.
Participant's Address: Bo- Naranjo P.O. Boy 1138 Emerio, P.R. 2078.
Participant's Email Address: h_Worales 53@yahoo, Com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 177283
Nature of Claim: Break 89-1995, 96-2,000, 164, 109-2003, 164-2003
By: margante moral Tons
Signature
Margarita Morales Liquena
Print Name
Public Employee
Title (if Participant is not an individual)
16/agnsto/2021
Date

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Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 82 of 126

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its coun	sel,
if any:	
Participant's Name: Angel Daniel Castro-Rivera	
Participant's Address: HC-02 Box 7473, Henue as PR. 0	0624
Participant's Email Address: anellastro2469mail.com	
Name of Counsel:	<del></del>
Address of Counsel:	
Email Address of Counsel:	_
2. Participant's Claim number and the nature of Participant's Claim:	
Claim Number: 178K3283-415	
Nature of Claim:	
By: (Ingel V Cartico Kenera	U.S.
Signature	SAN SERVICE
Print Name	
Title (if Participant is not an individual)	7 7 8
august 14 2021	
Date	

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HC-02 Box 7473

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# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc: Pro se Notices of Participation Page 84 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

Participant's Name:

Participant's Address:

Participant's Email Address:

Participant's Claim number and the nature of Participant's Claim:

Claim Number:

Participant's Claim number and the nature of Participant's Claim:

Claim Number:

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By:

Print Name

Teacher

Title (if Participant is not an individual)

17 de agost de 2021.

Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01

Irma Nydia Santas / Fro se Notices of Participation Page 85 of 126

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Calle Colombia F7 Cidra, Puerto Rico 00139



Discovery Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office 150 Ave. Carlos Chordon Ste. 150 San Juan, P. R. 00918-1767

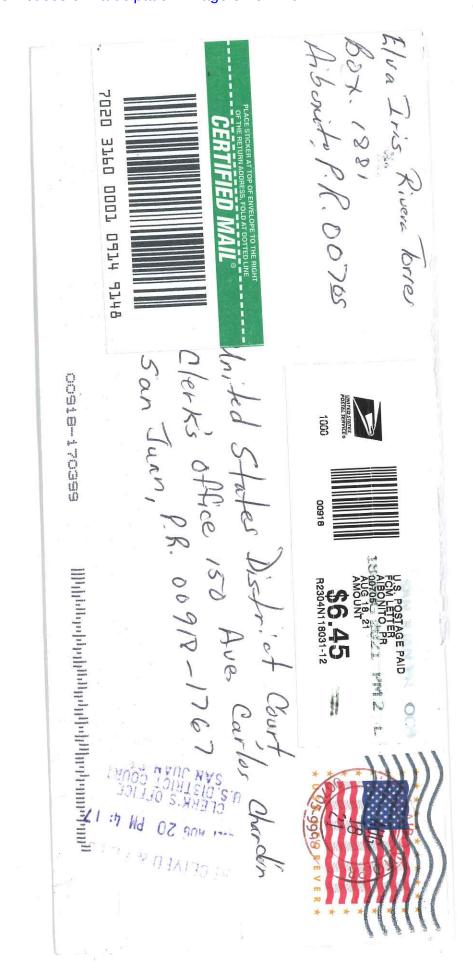
# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 86 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

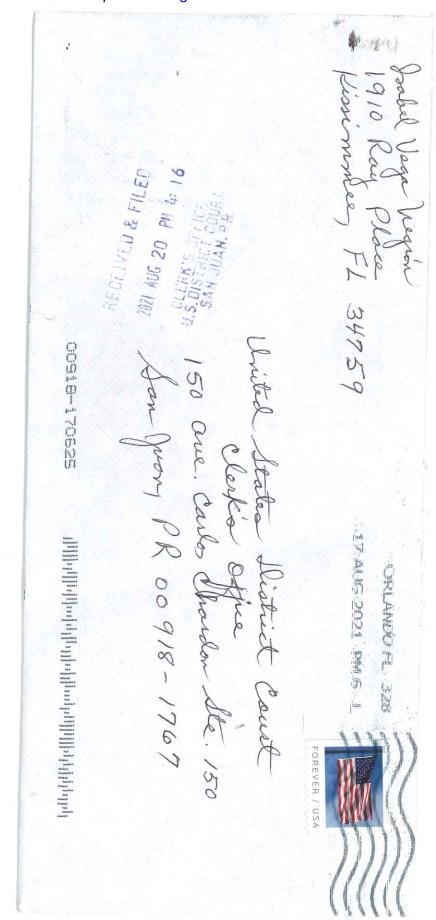
1.

if any:	
Participant's Name:	Elva Iris Rivera Torres
Participant's Address:	Box. 1881. Alborito, PR. 00705
Participant's Email Address:	riveratorreselva 1151@q. mail
Name of Counsel:	N/A
Address of Counsel:	NA
Email Address of Counsel:	N/A
2. Participant's C	Claim number and the nature of Participant's Claim:
Claim Number:	
Nature of Claim:	
By: Elva Tris	Riva Jures
Signature  Elva Tris Riv	
Print Name	Ela lorre
Maestra 7	
Title (if Participant is	not an individual)
Haosto 13 C	te 2021
	3 0



Participant must provide all of the information below in English:

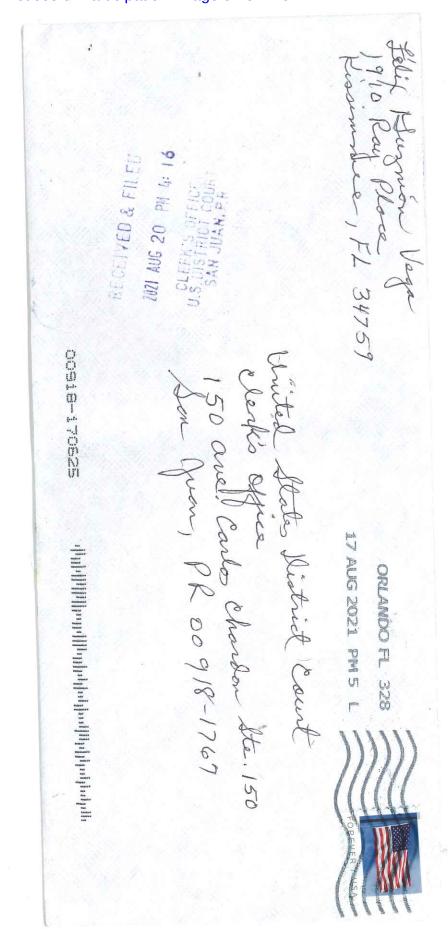
	1 1' and address and that of its	counsel.
	contact information, including email address, and that of its	000110019
if any:	- 1111	
Participant's Name:	Isabel Vega Negron	
Participant's Address:	1910 Ray Place Kissimmee, FL 347	759
Participant's Email Address:	yoyoya fga gmail. com	
Name of Counsel:		
Address of Counsel:		
Email Address of Counsel:		
2. Participant's	Claim number and the nature of Participant's Claim:	
Claim Number:	128663	
Nature of Claim:	Salary adjustment	
By: Sabel Vega	2 hegien	2021 AUG 20
Signature	<b>1</b> (0) = 1	AUG
Isabel Vega	· Vearon	20
Print Name	₹ <u>19</u>	To Ro
Title (if Participant i	is not an individual)	W 4: 16
August 16	, 2021	



# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Pro se Notices of Participation Page 90 of 126

Participant must provide all of the information below in English:

1.	Participant's if any:	contact inform	ation, includi	ing email address,	and that of it	s counsel,
Participant's 1	Name:	Felix	GUZ MO	in Vega		
Participant's A	Address:	1910 Ra	y Place	Kissim.	mee FL	34759
Participant's I	Email Address			mail. co-		
Name of Cour	nsel:			haj, cal		
Address of Co	ounsel:				6	
Email Address	s of Counsel:		do e			
2.	Participant's	Claim number	and the natur	e of Participant's	Claim:	
Claim Number		1278	4/		er vite film a market in	a filipa a
Nature of Clair	m:	Salary	Adra	STMENT		-
By: <u>Felig</u> Signatu	Lugn ire	in flege	a		S.DIST	SONY IZOR
Felir Print N	ame Guzm	an Veg	a		RICT COUL	ED & FILED 20 PM 4: 1.
Title (if	Participant is	not an individu	ual)			91:



Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 92 of 126

Participant must provide all of the information below in English:

<ol> <li>Participant's contact informs if any:</li> </ol>	ation, including email address, and that of its counsel,
Participant's Name: <u>Hex</u>	a Rios-Negrón
Participant's Address: River Go	arden #65, Canóvanas PR 00729
Participant's Email Address: alexal	rios 75 @ hotmail. com
Name of Counsel:	
Address of Counsel:	
Email Address of Counsel:	
2. Participant's Claim number	and the nature of Participant's Claim:
Claim Number: # 174	019 (\$22,140.00)
Nature of Claim: Salary (	Claim (KPE2007-4359 (803))
Signature  Hexa Rios Negroi  Print Name	REC SS. REC
Time Ivamo	AN JUA
Title (if Participant is not an individ	ual)
August 9, 2021 Date	FILED FILED

Civil Núm.: K PE2007-4359 (803) Segunda Querella Enmendada

Página 5

Querellantes

Vs.

AUTORIDAD DE EDIFICIOS
PUBLICOS DE PUERTO
RICO y LCDA. LEILA HERNÁNDEZ
UMPIERRE, en su carácter oficial como
Directora Ejecutiva de la Autoridad de
Edificios Públicos

Querellados

file #1

Junio 10,2014

# SEGUNDA QUERELLA ENMENDADA

#### AL HONORABLE TRIBUNAL:

Comparecen los querellantes, representados por los abogados que suscriben y muy respetuosamente ante este Honorable Tribunal exponen, alegan y solicitan:

- 1. La agencia querellada es una instrumentalidad corporativa del Estado Libre Asociado de Puerto Rico creada por la Ley Número 56 del 19 de junio de 1958. (3 LPRA 901 y ss). Las oficinas centrales de la parte querellada se encuentran en el Edificio Norte, Centro Gubernamental Roberto Sanchez Virella (antes Centro Gubernamental Minillas) Avenida De Diego, Parada 22 en Santurce, Puerto Rico 00940. La coquerellada Leila Hernández Umpierre es la Directora Ejecutiva de la Autoridad de Edificios Públicos y tiene su oficina principal en el piso 6. La pasada Directora Ejecutiva reconoció por escrito que la Junta de Directores aprobó para los querellantes efectivo el 1ro. de julio de 2004 en adelante, aumentos salariales anual por mérito. Véase comunicación del 13 de junio de 2004, que se acompaña. Anteriormente el Tribunal Supremo de Puerto Rico ha establecido que las normas, reglamentos, circulares de la Directora Ejecutiva o resoluciones de la Junta de Directores de una corporación pública forman parte del contrato de trabajo de los empleados. Santiago v. Kodak, 129 DPR 763, 775 (1992); Ada Iris Albino v. Martinez, 2007 JTS 117, pág. 1619 (2007).
- 2. La presente querella se tramita bajo el procedimiento sumario establecido en la Ley 2 del 17 de octubre de 1961 según enmendada, debido a que es una reclamación de salarios al amparo de decisiones de la Directora Ejecutiva y de la Junta de Directores de la Autoridad de Edificios Públicos, que forman parte del

Civil Núm.: K PE2007-4359 (803) Segunda Querella Enmendada

Página 13

cualquier otro dia laborable declarado libre por proclama, sin menoscabo de sus balances acumulados en otras licencias que asciende a una suma no menor de \$1,000,000.00 con la doble penalidad que establece la Ley 379, así como que paguen las costas, gastos y honorarios de abogado no menor de un 25% de la reclamación. Finalmente ordene a la querellada a pagarle a los querellantes que realmente son no exentos la cantidad correspondiente a los salarios devengados por horas extras a tiempo doble basado en la Ley 379 antes citada Rolón Garcia v. Charlie Car, 99 JTS 89; Malavé v. Oriental Bank, 2006 JTS 62, con la penalidad que establece la ley que asciende a una suma no menor de \$10,000,000.00 y que pague las costas, gastos y honorarios de abogados según antes solicitado.

# RESPETUOSAMENTE SOMETIDA.

En San Juan, Puerto Rico, a 10 de junio de 2014.

CERTIFICO: Haber enviado copia de la presente querella enmendada a la Lcda. Patricia Silva Musalem, SIFRE & MUÑOZ NOYA, CSP, P O Box 364428, San Juan, PR 00936-4428; Lcda. Esthermari Ortiz Rodríguez, Colinas Metropolitanas V17, Guaynabo, PR 00969 y Lcdo. Pedro Joel Landrau López, P O Box 29407, San Juan, PR 00929-0407.

HARRY ANDUZE MONTAÑO
Col. 4617 / RUA #3303
José A. MORALES BOSCIO
Col. 15296 / RUA #13983
1454 Avenida Fernández Juncos
San Juan PR 00909
Tel. (787) 723-7171
Fax. (787) 723-7278

Por:

HARRY ANDUZE MONTANO

Por:

JOSÉ A. MORALES BOSCIO

# esc:

# ESTADO LIBRE ASOCIADO DE PUERTO RICO TRIBUNAL DE PRIMERA INSTANCIA SALA SUPERIOR DE SAN JUAN

ALBERTO AGRON VALENTIN ASTRID N. AGOSTO FERNANDEZ LILLIAM ALMEYDA IBAEZ LYDIA E. ALBERTORIO RICARDO ALONSO FORTIER JOSE H. ANTUNEZ QUILES IRIS N. ARROYO MONJICA PEDRO ALVES PIEIRO NILDA I. BARRETO HERNANDEZ MELVIN E. BERRIOS DAVID **EDWIN BORRERO ALAMO** JULIA I. BUENO RAFAEL E. BOU PADILLA KENNETH BURGOS CORA NORMA M. CANCEL AYALA DHALIA N. CANCEL NIEVES **ELVIN CASIANO BELLO** JESUS R. COLLAZO CLAS **MILAGROS COLON PEREZ** JOSE A. CARABALLO PADILLA SONIA CARABALLO DELGADO **NEVADA E. CARRION DIAZ** ISMAEL CASTRO NEGRON JULIO CINTRON ESPINELL JAVIER CLAUDIO VELEZ LESLIE CORTES SANCHEZ JORGE IVAN CORA RIVERA CELEDONIO CRESPO SEPULVEDA JUAN R. CRUZ BERRIOS NYDIA CRUZ MONTES **HECTOR CRUZ VELAZQUEZ** FELIX A. DIAZ BURGOS EDNA L. DIAZ DIAZ AUREA ENCARNACION RIVERA FELIX A. FALCON RIVERA RAYMOND FERGELEC CINTRON ELIA J. FIGUEROA CARRILLO MAXIMINO FIGUEROA RIVERA MARIA DE LOS ANGELES FONTANEZ COSME JOSE I. FONTANEZ ORTIZ SONIA FUSTER GONZALEZ RUBEN GARCIA ACEVEDO JORGE L. GARCIA RIVERA GERARDO GARCIA VARELA RAFAEL GAZTAMBIDE VAZQUEZ MARIO GIERBOLINI RODRIGUEZ JOSE A. GOMEZ RIVERA MARIO GONZALEZ GONZALEZ ANDERSON GONZALEZ CONTRERAS BRENDA L. GONZALEZ DIAZ **ROBERTO GONZALEZ** JOSE D. GONZALEZ RAMOS DAMARIS GONZALEZ SANTIAGO LUIS 0. GÓNZALEZ SANTIAGO MIRIAM GONZALEZ SANTIAGO SANDRA GREGORY RIVERA

CIVIL NÚM.: K PE2007-4359 (803)

#### SOBRE:

RECLAMACIÓN DE SALARIOS, AUMENTO POR MÉRITO APROBADO POR LA JUNTA DE DIRECTORES PARA LOS AÑOS 2005, 2006, 2007, 2008, 2009 Y 2010; DÍA POR PROCLAMA A TIPO DOBLE Y SIN CARGO LICENCIA ALGUNA, Y RECLAMACIÓN DE HORAS EXTRAS.

Mexackios Negron

Urb. River Garden #65

Canóvanas PR 00729

RECEIVED & FILED

Jenk's Office 150 Auc. Carbs Chardon Ste 150 Sun Juan PR. 00918-1767

Section of the sectio

SAN JUAN PR 009



# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc: Pro se Notices of Participation Page 97 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

2021 AUG. 20 PM 4: 15

CLERK'S OFFICE U.S.DISTRICT COUP SAN JUAN P.E.

Ourt's Clerks Office Inited States District Court Clerk's Office 50 Ave. Carlos Chardon

00918.

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:				
Participant's Name:	Emilia	Carrasqui	110	
Participant's Address:	123 Chate	eay Cir. Del	Bary Fl. 3	27/3
Participant's Email Address:	emiliocarr	asquillo 150	gmail. co	m
Name of Counsel:	- المكتب	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		C ale
Address of Counsel:				
Email Address of Counsel:				
2. Participant's C		the nature of Particip		
Nature of Claim:	Promeso	3283-17 Title III	"ERS"	?
By: Emilio Co	Pengas (ing 2011s	70	marks make that is	7021
Print Name			\$200 500 500 500 500 500 500 500 500 500	NEW CELL
also see sak oo maa waxaa saa			LET'S	/ED 20
Title (if Participant is	not an individual	)	200	平 元
8-16-202	-1		722	£ F
Date				5

123 Chateau Cir. DeBary 28.32713

Emilia Carrasquillo

PLOEIVED & FILE

Son Juan P. R. 00918-1767 Clerks Office 150 150 Ave. Cardon Chardonte.

00918-170525

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# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 101 of 126

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

if any: David Figueroa Vega 113 Vista Hermosa Lidra P.R. 00739 Participant's Name: Participant's Address: Participant's Email Address: Sylvia Gonzalez 1944 @ Gmail. Com Name of Counsel: Address of Counsel: Email Address of Counsel: Participant's Claim number and the nature of Participant's Claim: 2. Claim Number: Retirement Pension Dept of Education Nature of Claim: David Figueroa Vega Print Name Title (if Participant is not an individual) August 19, 2021 Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice

2021 AUG 20 PH 4: 15

San Juan, P. R. 009 18-1767

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Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Pro se Notices of Participation Page 102 of 126

David Figueron Vega 113 Visto Hemisa

Cidro P. R 00739

United States District Court, Clerk's office

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#### Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 103 of 126

Participant must provide all of the information below in English:

1.

Date

Participant's contact information, including email address, and that of its counsel,

Participant's Name:

Participant's Address:

Participant's Email Address:

Name of Counsel:

Address of Counsel:

Email Address of Counsel:

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

Nature of Claim:

Print Name

Norma Rodrigue zo Cintron

Print Name

Print Name

Print Name

Participant's Name

Cintron

Rodrigue zo Cintron

Print Name

Print Name

Print Name

Print Name

Participant's Name

Cintron

Rodrigue zo Cintron

Rodrigue zo Cintron

Print Name

<u>Instructions for Filing Notice of Participation</u>: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are <u>not</u> represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Title (if Participant is not an individual)

00918-170825 6-00818-1269 19 AUG 2021 FM-1 SAN JUAN PR

# Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 105 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

ii any:	
Participant's Name:	Norma Rodrigues Cintrón Urb. Las Hores I-P Callety Juana Díaz, PR 00
Participant's Address:	Urb. Las Flores I-P Callet Juana Diaz, PR 00
Participant's Email Addre	ess:
Name of Counsel:	
Address of Counsel: -	
Email Address of Counse	el:
2. Participan	t's Claim number and the nature of Participant's Claim:
Claim Number:  Nature of Claim:	lain for money and for years of service
By: Morma Pr Signature	dright features and freeto local
Nonma 30 Print Name	driguez (intron
Title (if Participal	nt is not an individual)
19 agr	D2/
	Notice of Participation: If you are represented by counsel, this Notice

58200 70 00918-170625 1921-8600harden Ste 150 remain of the control SAN JUAN PR Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 107 of 126

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any: Participant's Name: Participant's Address: Participant's Email Address: Name of Counsel: Address of Counsel: Email Address of Counsel: Participant's Claim number and the nature of Participant's Claim: 2. Claim Number: Nature of Claim: Bv: Title (if Participant is not an individual)

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Aguire, Pl. 00104

DOLERA'S OFFICE J.S. DISTRICT COUR SAN JUAN, P. R.

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justed States Shatiet Court Clerk's Offices 180 Are Conto Charter Ste 130 Son Juan, P.R. 0098-1767

SAN JUAN PR 009



## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Desc Pro se Notices of Participation Page 109 of 126

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

Participant's Name:

Participant's Address:

Participant's Email Address:

Participant's Email Address:

Name of Counsel:

Address of Counsel:

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

Nature of Claim:

By:

David Maldonado

Print Name

Individual

Title (if Participant is not an individual)

August 13, 2021

David Maldonado

Print Participant is not an individual)

August 13, 2021

Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are <u>not</u> represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

I am claiming the amount of \$4,800.00 dollars
based on Law 89 of July 12,1979. Uniform tax
based on Law 89 of July 12,1979. Uniform tax
"Romerazo" for the years that I worked for Puerto
"Romerazo" for the years from August 22,1995 to
Priew Telephone : These were from August 22,1995 to
August 22,1999.

Condominion Them It 55% Calle Austral Apto 1002 San Juan PR 00920

RECEIVED & FILED

2021 AUG 20 PM 4: 16

U.S. DISTRICT COURS

Noo-1-0120

Courts Clerk's Office
United States District Court
Clerk's Office
150 Ave. Carlos Chardon Ste 150
San Juan, PR DO 918-1767
San Juan, PR DO 918-1767

SAN JUAN PR 009



## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Pro se Notices of Participation Page 112 of 126

Participant must provide all of the information below in English:

1. Participant's of if any:	contact information, including email address, and that of its cou	ınsel,
Participant's Name:	Petra Rodriguez Rosales	. m . m
Participant's Address:	Petra Roduguez Rosales 2 Calle B, Apto. 1403 Villas de Montecarlos, Son Juan, P. a. 0092	24
Participant's Email Address:	Prodriguez 1403 Q not mail. com	
Name of Counsel:	U/A	
Address of Counsel:	U/A	
Email Address of Counsel:	MA	
2. Participant's C	Claim number and the nature of Participant's Claim:	
Claim Number:	NO. 17 BK 3283-LTS	
Nature of Claim:	PROMESA THE TI	
By: Peta Robigi Signature	iz Rosales	7071 A
Petro Roding Print Name	Jer Rosales	IVED &
This don		
Title (if Participant is n	iot an individual)	
12 agosto Date	2021	

Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in In re Commonwealth of Puerto Rico, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

PETRA RODRIGUEZ ROSALES
2 CALLE B, APTO. 1403
VILLAS DE MONTECARLOS
SAN JUAN, PUERTO RICO 00924

ME CELIVED & FILED

MI AUG 20 PH 4: 16
U.S. DISTRICE

UNITED STATES DISTRICTO COURT, CLERK'S OFFICE 150 AVE. CARLOS CHARDON STE. 150 SAN JUAN, PUERTO RICO 00918-1767

դիս Էդիարկայի կիսարդիր արդարդարի

00010-170625



Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:		
	L PRE	
Participant's Address: 107 Ca	Me ayaher. com Humacao,	PDD
Participant's Email Address: alope, 67	The ayaher . com HUMACAO,	2070
Name of Counsel:		
Address of Counsel:		
Email Address of Counsel:		
2. Participant's Claim number and Claim Number:  Nature of Claim:  By:  Signature	d the nature of Participant's Claim:  7 BK 32 83 - LT 5  AN OF ADJUSTMENT.	
Print Name  Title (if Participant is not an individual Date	RECEIVED & FILE  1021 AUG 20 PM 4:  SAN JUAN. P. 6  SAN JUAN. P. 6	

<u>Instructions for Filing Notice of Participation</u>: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are <u>not</u> represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

RECEIVEU

2021 AUG 20 P

U.S. DISTRICT C SAN JUAN. DR.ADALBERTO LÖPEZ AVE CRUZ ORTIZ STELLA #107 SUR HUMACAO, PUERTO RICO, 00791

Lank's office 50 Ave. Carlos Chardon Dec an Juan, P. R. 00918-1767

SAN JUAN PR 009



Maticase: 17-03283-LTS Dioc#: 17948-1 Pro se Notices of Participation Page 116 of 12 Commonwealth Plan Case no. 17 BK 3283-LTS Participant must provide all the information bellow in English 1. Participant's contact information, including email address and that of its counsel, if any: Participant's name: LUZ D. SUAREZ RIVERA Participant's address: URB. JARDINES DE ARROYO CALLE O. C-54 ARROYO, PR 00714 Participant's email address: ds evelyn@yahoo.com Name of counsel: N/A Address of counsel: N/A Email address of counsel: N/A 2. Participant's claim number and the nature of Participant's Claim: Claim Number: 104259 Nature of claim: Legal action pending resolution with the Government of Puerto Rico for which the following documents have been submitted: 1. Evidence of claim in June 2018. 2. Information guestionnaire requested to process the claim in October 2019. 3. Reply in February 2020

- 4. Affidavit in February 2020
- 5. Certification of years of service in the Puerto Rico Department of Education. For the record, I, Luz D. Suarez Rivera, claim #104259, hereby certify that I was an employee of the Puerto Rico Department of Education from October 9, 1978 to July 28, 2009. That during this period under the protection of applicable laws; Law 34 of June 1969, Law 89 of July 1979, Law 96 of January 2002, and Law 164 of July 2003 I stopped receiving the corresponding payments and increases for which I have submitted a claim for the approximate amount of \$26,680.00 corresponding to the periods of the laws during my years of service in the Department of Education of Puerto Rico. Indemnification that corresponds to me as stipulated in the aforementioned Laws, and applicable in each of the periods of time in said laws.

By:	Less De Sung him
-	Signature
	Luz D. Suarez Rivera
	Print name
	Title (if Participant is not an individual)
	August 13, 2021
	Date

RECEIVED & FILED 2021 AUG 20 PM 4: 15 LERK'S FIRST DISTRICT COURS AN JUAN COST & LYCKE FOREVER 

## Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Pro se Notices of Participation Page 118 of 126

Participant must provide all of the information below in English:

<ol> <li>Participant's contact information, including email addressif any:</li> </ol>	ss, and that of its counsel,
Participant's Name: Irones Jomenes	Livera
Participant's Address: Bo Espinal By 152	A Aganda P.K
Participant's Email Address: Trehes Jimenez @ 6h	nail com
Name of Counsel:	
Address of Counsel:	
Email Address of Counsel:	
2. Participant's Claim number and the nature of Participant	's Claim:
Claim Number: = ase Ab 17BK 3283-LTS	)*
Nature of Claim:  By: Signature Spring Revers	
Signature  Liveres Jimenez Bivera  Print Name	\$100 SANS
Title (if Participant is not an individual)	

Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in In re Commonwealth of Puerto Rico, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Case:17-03283-LTS Doc#:17948-1 Filed:08/23/21 Entered:08/23/21 11:44:01 Pro se Notices of Participation Page 119 of 126 Trenes James Durera Bo. Espinal By 152 A Aguada, P-B. 00602 frameson falle III Me 17BK 3283 LTS 19 M M goods 2021 United States Oustrat count. clark office 150 and conlos chardon ste 150 Sonfran, PR 00918-1767 Estimosos Senores: Herenbido Vanos comunicaciones de ustedes relacionada a los asos de Prio mesa Litula /11. mi choma es español y ho domino al el lugles, for rogon enné un documento que holis que completor y denolunto, lo ensué à la dirección del Solve de corred y ho en asi-Estoy enmande a histeres copin del do,-armente como embencio para la assion Espero tomen en consideración mi aso-Partments. Ovedo de vistedes;

Drenes Jameis Rusia Fel. 787-318-1679 A Comment of the Comm SAN JUAN PR Notice: 17-03283-LTS-Dec#: 17948-1 Filed: 08/23/21 Entered: 08/23/21.11:44:01 Desc:

Pro se Notices of Participation, Page 121 of 126

Common wealth Plan Confirmation, in In re Commonwealth

P. R. Cos. no. 17 BK 3283-LT5

Participant must provide all the information bellow in English

 Participant's contact information, including email address and that of its counsel, if any:

Participant's name: EVELYN DIAZ SUAREZ

Participant's address: PARQUES DE GUASIMAS 112 CALLE CEDRO

ARROYO, PR 00714

Participant's email address: ds evelyn@yahoo.com

Name of counsel: N/A Address of counsel: N/A

Email address of counsel: N/A

2. Participant's claim number and the nature of Participant's Claim:

Claim Number: 102986

Nature of claim:

Legal action pending resolution with the Government of Puerto Rico for which the following documents have been submitted:

- Evidence of claim in June 2018.
- 2. Information questionnaire requested to process the claim in October 2019.
- 3. Reply in February 2020
- 4. Affidavit in February 2020
- 5. Certification of years of service in the Puerto Rico Department of Education. For the record, I, Evelyn Díaz Suárez, claim #102986, hereby certify that I was an employee of the Puerto Rico Department of Education from August 2, 1982 to December 31, 2012. That during this period under the protection of applicable laws; Law 34 of June 1969, Law 89 of July 1979, Law 96 of January 2002, and Law 164 of July 2003 I stopped receiving the corresponding payments and increases for which I have submitted a claim for the approximate amount of \$35,680.00 corresponding to the periods of the laws during my years of service in the Department of Education of Puerto Rico. Indemnification that corresponds to me as stipulated in the aforementioned Laws, and applicable in each of the periods of time in said laws.

By:	22
	Signature
	Evelyn Diaz Suarez
	Print name
	Title (if Participant is not an individual)
	August 13, 2021
	Date

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U.S. DISTRICT COURT

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Pro se Notices of Participation Page 123 of 126

Commonwealth Plan Confirmation on the Commonwealth of P.K.

Case no. 17 BK 3283-LTS

Participant must provide all the information bellow in English

1. Participant's contact information, including email address and that of its counsel, if

any:

Participant's name: SONIA DIAZ SUAREZ

Participant's address: URB. EL PALMAR 1 B-2 ARROYO, PR 00714

Participant's email address: ds\_evelyn@yahoo.com

Name of counsel: N/A Address of counsel: N/A

Email address of counsel: N/A

2. Participant's claim number and the nature of Participant's Claim:

Claim Number: 104346

Nature of claim:

Legal action pending resolution with the Government of Puerto Rico for which the following documents have been submitted:

- 1. Evidence of claim in June 2018.
- 2. Information questionnaire requested to process the claim in October 2019.
- 3. Reply in February 2020
- 4. Affidavit in February 2020
- 5. Certification of years of service in the Puerto Rico Department of Education. For the record, I, Sonia Díaz Suárez, claim #104346, hereby certify that I was an employee of the Puerto Rico Department of Education from August 6, 1985 to July 28, 2015. That during this period under the protection of applicable laws; Law 34 of June 1969, Law 89 of July 1979, Law 96 of January 2002, and Law 164 of July 2003 I stopped receiving the corresponding payments and increases for which I have submitted a claim for the approximate amount of \$30,880.00 corresponding to the periods of the laws during my years of service in the Department of Education of Puerto Rico. Indemnification that corresponds to me as stipulated in the aforementioned Laws, and applicable in each of the periods of time in said laws.

By:	Some Dias Surry	
	Signature	_
,	Sonia Diaz Suarez	_
	Print name	, .
	Title (if Participant is not an individual)	
	August 13, 2021	-
	Date	200

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Plan Confirmation, in In recommonwealth of P. R.

Case No. 17 BK 3283-LTS

Participant must provide all the information bellow in English

 Participant's contact information, including email address and that of its counsel, if any:

Participant's name: GENOVEVA SUAREZ RIVERA

Participant's address: URB. BROOKLYN #31 ARROYO, PR 00714

Participant's email address: ds evelyn@yahoo.com

Name of counsel: N/A Address of counsel: N/A

Email address of counsel: N/A

2. Participant's claim number and the nature of Participant's Claim:

Claim Number: 116731

Nature of claim:

Legal action pending resolution with the Government of Puerto Rico for which the following documents have been submitted:

- 1. Evidence of claim in June 2018.
- 2. Information questionnaire requested to process the claim in October 2019.
- 3. Reply in February 2020
- 4. Affidavit in February 2020
- 5. Certification of years of service in the Puerto Rico Department of Education. For the record, I, Genoveva Suarez Rivera, claim #116731 hereby certify that I was an employee of the Puerto Rico Department of Education from January 19, 1970 to May 31, 2000. That during this period under the protection of applicable laws; Law 34 of June 1969, Law 89 of July 1979, Law 96 of January 2002, and Law 164 of July 2003 I stopped receiving the corresponding payments and increases for which I have submitted a claim for the approximate amount of \$17,560.00 corresponding to the periods of the laws during my years of service in the Department of Education of Puerto Rico. Indemnification that corresponds to me as stipulated in the aforementioned Laws, and applicable in each of the periods of time in said laws.

By:	Genoueva Sunz Ruira	
•	Signature	
3	Genoveva Suarez Rivera	
	Print name	
	<u> </u>	
	Title (if Participant is not an individual)	
	August 13, 2021	
8	Date	

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